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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 343

Application Number	10/600,061
Filing Date	June 20, 2003
First Named Inventor	LINA, Cesar Z.
Art Unit	3761
Examiner Name	HAND, Melanie Jo
Attorney Docket Number	VAC.5671.US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC. (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form used in lieu of PTO/SB/08A/B (3 pgs); Cited References (335 pgs); Acknowledgement Postcard.
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Kinetic Concepts, Inc.		
Signature			
Printed name	Robert W. Mason		
Date	August 8, 2007	Reg. No.	42,848

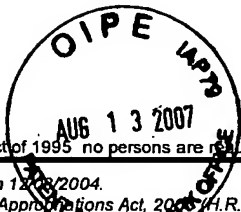
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
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Typed or printed name	Geri Pieper	Date	August 8, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Attorney Docket No. VAC.5671.US

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PTO/SB/17 (07-07)

Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/28/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2007☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 180.00**Complete if Known**

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Filing Date	June 20, 2003
First Named Inventor	LINA, Cesar Z.
Examiner Name	HAND, Melanie Jo
Art Unit	3761
Attorney Docket No.	VAC.5671.US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 500326 Deposit Account Name: Kinetic Concepts, Inc.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ - 20 or HP = _____ x _____ = _____			

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ - 3 or HP = _____ x _____ = _____			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____				

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other. (e.g., late filing surcharge): IDS Late Filing Surcharge**Fees Paid (\$)**

180.00

SUBMITTED BY

Signature	<u>Robert W. Mason</u>	Registration No. (Attorney/Agent) 42,848	Telephone 210-255-6271
Name (Print/Type)	Robert W. Mason	Date August 8, 2007	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No. VAC.5671.US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/600,061 Confirmation No.: 5656
Applicant : LINA, Cesar Z.
Filed : June 20, 2003
TC/A.U. : 3761
Examiner : HAND, Melanie Jo
Docket No. : VAC.5671.US
Customer No.: 60402

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. § 1.97

Dear Sir or Madam:

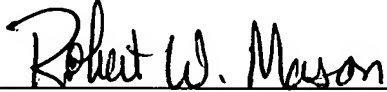
In compliance with the duty of disclosure set forth in 37 C.F.R. §1.56, Applicant is submitting one form used in lieu of PTO/SB/08A/B (3 pages) along with cited references therein. This Supplemental Information Disclosure Statement is being filed in accordance with 37 C.F.R. §1.97(c)(2). The Commissioner is authorized to charge any required fees to Deposit Account No. 500326.

Under 37 CFR 1.98 (a)(2)(ii) no copies of any mentioned U.S. patents and U.S. patent application publications are submitted. However, if the Office requires copies, applicant will provide in a timely manner.

08/14/2007 HADELR1 00000028 500326 10600061
01 FC:1806 180.00 DA

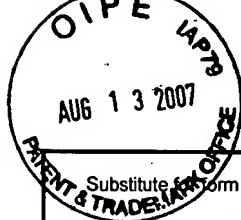
Applicant respectfully requests full and proper consideration of the listed information during examination of the application, and that the listed information be printed on any patent that issues therefrom.

Respectfully submitted,

A handwritten signature in black ink that reads "Robert W. Mason". The signature is written in a cursive style with a horizontal line underneath it.

For Applicant

Robert W. Mason, Reg. No.: 42,848
Sr. Intellectual Property Counsel
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Used in Lieu of PTO/SB/08A/B
(Based on PTO 04-07 version)

Substitute for Form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete if Known

Sheet	1	of	3	Application Number	10/600,061
				Filing Date	June 20, 2003
				First Named Inventor	LINA, Cesar Z.
				Art Unit	3761
				Examiner Name	HAND, Melanie Jo
				Attorney Docket Number	VAC.5671.US

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
		1355846	10-19-1920	Rannells	Figs; 1,2
		3066672	12-04-1962	Crosby, W.H. Jr., et al	
		3520300	07-14-1970	Flower, Guiles, Jr.	
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		4826494	05-02-1989	Richmond et al.	Column 1
		5086170	02-04-1992	Luheshi, A., et al	
		5092858	03-03-1992	Benson, C.D., et al	
		5134994	08-04-1992	Say, Sam L.	
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		5278100	01-11-1994	Doan, T, et al	
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		5437622	08-01-1995	Carion, Jean-Pierre	
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		6241747	06-05-2001	Ruff, Gregory L.	
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		6814079	11-09-2004	Heaton, K., et al.	
		20020077661	06-20-2002	Saadat, Vahid	

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)				
		AU-745271	04-05-1999	Heaton, K., et al		
		AU-755496	02-14-2002	Heaton, K., et al		
		CA-2005436	06-30-1990	Kalt, Glenda G.		
		DE-26 40 413 A1	03-09-1978	Wurster, Helmut		
		DE-43 06 478 A1	09-08-1994	Wagner, W.		
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		EP-1018967 B1	08-18-2004	Heaton, K., et al		
		GB-692,578	06-10-1953	Minnesota Mining & Manufa		
		GB-2 197 789 A	06-02-1988	Hannam, P., et al		
		GB-2 220 357 A	01-10-1990	Wood, James Michael		
		GB-2 235 877 A	03-20-1991	Talluri, Antonio		
		GB-2 333 965 A	08-11-1999	Heaton, K., et al		

Examiner Signature		Date Considered	
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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>			Complete if Known		
			Application Number	10/600,061	
			Filing Date	June 20, 2003	
			First Named Inventor	LINA, Cesar Z.	
			Art Unit	3761	
			Examiner Name	HAND, Melanie Jo	
Sheet	2	of	3	Attorney Docket Number	VAC.5671.US

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		GB-2 329 127 B	08-16-2000	Heaton, K., et al		
		JP4129536	04-30-1992	Terumo Corp.	Abstract	
		SG-71559	04-16-2002	Heaton, K., et al		
		WO 80/02182	10-16-1980	Moss, James		
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		WO 96/05873	02-29-1996	Lina, et al		
		WO 99/13793	03-25-1999	Heaton, K., et al		

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NON PATENT LITERATURE DOCUMENTS				
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²	
	1	LOUIS C. ARGENTA, MD and MICHAEL J. MORYKWAS, PhD; "Vacuum-Assisted Closure: A New Method for Wound Control and Treatment: Clinical Experience"; Annals of Plastic Surgery, Vol. 38, No. 6, June 1997; pp. 563-576		
	2	JOHN MASTERS; "Reliable, Inexpensive and Simple Suction Dressings"; Letter to the Editor, British Journal of Plastic Surgery, 1998, Volume 51 (3), page 267; Elsevier Science/The British Association of Plastic Surgeons, UK		
	3	S.E. GREER, et al "The Use of Subatmospheric Pressure Dressing Therapy to Close Lymphocutaneous Fistulas of the Groin" British Journal of Plastic Surgery (2000), 53, pp. 484-487		
	4	ORRINGER, JAY, et al; "Management of Wounds in Patients with Complex Enterocutaneous Fistulas"; Surgery, Gynecology & Obstetrics, July 1987, Vol. 165, pp. 79-80		
	5	International Search Report for PCT International Application PCT/GB95/01983; November 23, 1995		
	6	PCT International Search Report for PCT International Application PCT/GB98/02713; January 8, 1999		
	7	PCT Written Opinion; PCT International Application PCT/GB98/02713; June 8, 1999		
	8	PCT International Examination and Search Report, PCT International Application PCT/GB96/02802; Jan. 15, 1998 & April 29, 1997		
	9	PCT Written Opinion, PCT International Application PCT/GB96/02802; Sept. 3, 1997		
	10	DATTILO, PHILIP P., JR., et al; "Medical Textiles: Application of an Absorbable Barbed Bi-directional Surgical Suture"; Journal of Textile and Apparel, Technology and Management, Volume 2, Issue 2, Spring 2002, pp.: 1-5		
	11	KOSTYUCHENOK, B.M., et al; "Vacuum Treatment in the Surgical Management of Purulent Wounds"; Vestnik Khirurgi, September 1986, pp. 18-21 and 6 page English translation thereof.		

Examiner Signature	Date Considered
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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>			Complete if Known		
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			Art Unit	3761	
			Examiner Name	HAND, Melanie Jo	
Sheet	3	of	3	Attorney Docket Number	VAC.5671.US

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²	
	12	DAVYDOV, YU. A., et al; "Vacuum Therapy in the Treatment of Purulent Lactation Mastitis"; Vestnik Khirurgi, May 14, 1986, pp.: 66-70, and 9 page English translation thereof.		
	13	YUSUPOV, YU. N., et al; "Active Wound Drainage", Vestnik Khirurgi, Vol. 138, Issue 4, 1987, and 7 page English translation thereof.		
	14	DAVYDOV, YU. A., et al; "Bacteriological and Cytological Assessment of Vacuum Therapy for Purulent Wounds"; Vestnik Khirurgi, May 2, 1986, pp.: 42-46, and 7 page English translation thereof.		
	15	DAVYDOV, YU. A., et al; "Concepts for the Clinical-Biological Management of the Wound Process in the Treatment of Purulent Wounds by Means of Vacuum Therapy"; Vestnik Khirurgi, July 7, 1980, pp.: 132-136, and 8 page English translation thereof.		
	16	CHARIKER, MARK E., M.D., et al; "Effective Management of incisional and cutaneous fistulae with closed suction wound drainage"; Contemporary Surgery, Vol 34, June 1989, pp.:59-63		
	17	Egnell Minor, Instruction Book, First Edition, 300 7502, February 1975, pp. 24		
	18	Egnell Minor: Addition to the Users Manual Concerning Overflow Protection – Concerns all Egnell Pumps, February 3, 1983, pp. 2		
	19	SVEDMAN, P.: "Irrigation Treatment of Leg Ulcers", The Lancet, September 3, 1983, pp. 532-534		
	20	CHINN, Steven D. et al.: "Closed Wound Suction Drainage", The Journal of Foot Surgery, Vol. 24, No. 1, 1985, pp. 76-81		
	21	ARNLJOTS, Björn et al.: "Irrigation Treatment in Split-Thickness Skin Grafting of Intractable Leg Ulcers", Scand J. Plast Reconstr. Surg., No. 19, 1985, pp. 211-213		
	22	SVEDMAN, P.: "A Dressing Allowing Continuous Treatment of a Biosurface", IRCS Medical Science: Biomedical Technology, Clinical Medicine, Surgery and Transplantation, Vol. 7, 1979, p. 221		
	23	SVEDMAN, P. et al.: "A Dressing System Providing Fluid Supply and Suction Drainage Used for Continuous or Intermittent Irrigation", Annals of Plastic Surgery, Vol. 17, No. 2, August 1986, pp. 125-133		

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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